



Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

State of West Virginia
Master Agreement

Order Date: 02-22-2024

CORRECT ORDER NUMBER MUST
 APPEAR ON ALL PACKAGES, INVOICES,
 AND SHIPPING PAPERS. QUESTIONS
 CONCERNING THIS ORDER SHOULD BE
 DIRECTED TO THE DEPARTMENT
 CONTACT.

Order Number:	CMA 0211 4072 GSD2200000008 3	Procurement Folder:	1044293
Document Name:	Water Treatment and Legionella Testing Services	Reason for Modification:	Change Order No. 2 To renew the contract.
Document Description:	Water Treatment and Legionella Testing Servic		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2022-03-25
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-03-24

VENDOR		DEPARTMENT CONTACT	
Vendor Customer Code:	VC0000032858	Requestor Name:	Robert P Kilpatrick
CHEM AQUA INC PO BOX 152170		Requestor Phone:	(304) 558-2002
IRVING TX 750152170 US		Requestor Email:	robert.p.kilpatrick@wv.gov
Vendor Contact Phone:	000-000-0000 Extension:		
Discount Details:			
	Discount Allowed	Discount Percentage	Discount Days
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

24
FILE LOCATION

INVOICE TO	SHIP TO
DEPARTMENT OF ADMINISTRATION GENERAL SERVICES DIVISION 103 MICHIGAN AVENUE CHARLESTON WV 25305 US	STATE OF WEST VIRGINIA JOBSITE - SEE SPECIFICATIONS No City WV 99999 US

2-28-24 GC

Total Order Amount:	Open End
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Purchasing Division's File Copy

MKP 02/27/2024

PURCHASING DIVISION AUTHORIZATION
 DATE: *Tara Hefner 2/27/2024*
 ELECTRONIC SIGNATURE ON FILE

ENTERED
 ATTORNEY GENERAL APPROVAL AS TO FORM
 DATE: *John S. Gray*
 ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION
 DATE: *MAR 05 2024*
 ELECTRONIC SIGNATURE ON FILE

3/5/2024

Extended Description:

Change Order

Change Order No. 2 is issued to renew the original contract according to all terms, conditions, prices and specifications contained in the original contract including authorized change orders.

Effective date of renewal March 25, 2024 through March 24, 2025.
Renewal Years Remaining: 0

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	83101506			EA	50.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 1

Extended Description:

See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	83101506			EA	0.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 3

Extended Description:

See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	83101506			EA	115.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 4

Extended Description:

See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	83101506			EA	275.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 5

Extended Description:

See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	83101506			EA	100.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 6

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
6	83101506			EA	50.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 8

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
7	83101506			EA	1000.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 11

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
8	83101506			EA	125.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 17

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
9	83101506			EA	100.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 22

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
10	83101506			EA	200.000000
	Service From	Service To		Service Contract Amount	
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 23

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
11	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 25

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
12	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 36

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
13	83101506			EA	325.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 37

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
14	83101506			EA	300.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 55

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
15	83101506			EA	115.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 84

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
16	83101506			EA	115.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Monthly Treatment - Bldg. 86

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
17	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 3

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
18	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 4

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
19	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 5

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
20	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 6

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
21	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 8

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
22	83101506			EA	100.000000
	Service From	Service To			Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 11

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
23	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 17

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
24	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 22

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
25	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 23

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
26	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 25

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
27	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 36

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
28	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 37

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
29	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 55

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
30	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 84

Extended Description:
See attached Pricing Pages.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
31	83101506			EA	100.000000
	Service From	Service To			
					Service Contract Amount
					0.00

Commodity Line Description: Legionella Testing - Bldg. 86

Extended Description:
See attached Pricing Pages.



STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
GENERAL SERVICES DIVISION
State Capitol
Charleston, West Virginia 25305

Mark D. Scott
Cabinet Secretary

John K. McHugh
Director

February 12, 2024

Chem Aqua Inc
PO BOX 152170
Irving, TX, 75215

REF: CMA 0211 GSD2200000008 Water Treatment and Legionella Testing Services

Mr. Bradford,

The above referenced contract expired on March 24, 2024. The West Virginia Department of Administration, General Services Division wishes to renew the contract for one (1) year under the same pricing, specifications, terms and conditions. The renewal term of the contract will be March 25, 2024 through March 24, 2025. If you are in agreement to renew this contract, please sign below and return to Cody Taylor, via email at Cody.G.Taylor@wv.gov, at your earliest convenience.

If you have any questions, please feel free to contact me.

Thank you, *Cody Taylor*

Cody Taylor
Procurement Specialist, General Services Division

James Lorditch/ *James Lorditch*
Name/Signature

02/19/24
Date

Vice President

Title



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/30/2024

4/25/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER LOCKTON COMPANIES 2100 ROSS AVENUE, SUITE 1400 DALLAS TX 75201 214-969-6700		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:		FAX (A/C, No):
INSURED 1479805 Chem-Aqua, Inc. 2727 Chemsearch Blvd Irving TX 75062		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: ACE American Insurance Company		22667
		INSURER B: Aspen Specialty Insurance Company		10717
		INSURER C: Allied World Specialty Insurance Company		16624
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 18589795 **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liab. <input checked="" type="checkbox"/> Transportation Poll GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	ERAEYV723	4/30/2023	4/30/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY	N	N	ISAH10764865	4/30/2023	4/30/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
B C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	EXAEYVA23 0311-8393	4/30/2023 4/30/2023	4/30/2024 4/30/2024	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$ XXXXXXXX
A A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WLRC50735096 SCFC50735187	4/30/2023 4/30/2023	4/30/2024 4/30/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$ 2,000,000 E.I. DISEASE - EA EMPLOYEE \$ 2,000,000 E.I. DISEASE - POLICY LIMIT \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Excess Liability #EXAEYVA23 covers excess of primary General Liability
 Umbrella Policy #0311-8393 covers excess of primary Automobile Liability and Employers Liability
 Umbrella/Excess Liability limit per occurrence is \$2,000,000 / aggregate limit is \$2,000,000. State of West Virginia, Purchasing Division, and State Capital Complex are included as Additional Insureds.

CERTIFICATE HOLDER**CANCELLATION** See Attachments

18589795

 State of West Virginia
 Purchasing Division
 State Capital Complex
 2019 Washington Street
 East Charleston WV 25305-0130

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

The General Liability policy includes Blanket Additional Insured Endorsement and Blanket Waiver of Subrogation Endorsement and Primary and Non-contributory. Excess / Umbrella Liability policies include Blanket Additional Insured Endorsement and Blanket Waiver of Subrogation Endorsement. Excess / Umbrella Liability follow form.

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Business and Licensing

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Business Organization Detail

NOTICE: The West Virginia Secretary of State's Office makes every reasonable effort to ensure the accuracy of information. However, we make no representation or warranty as to the correctness or completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.

CHEM-AQUA, INC.

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C Corporation	4/9/1999		4/9/1999	Foreign	Profit			

Organization Information			
Business Purpose	4246 - Wholesale Trade - Wholesale Trade, Nondurable Goods - Chemical and Allied Products Merchant Wholesalers (plastics, other)		Capital Stock 0.0000
Charter County		Control Number	0
Charter State	TX	Excess Acres	0
At Will Term		Member Managed	
At Will Term Years		Par Value	0.000000
Authorized Shares	0	Young Entrepreneur	Not Specified

Addresses	
Type	Address
Mailing Address	PO BOX 152170 TAX DEPT IRVING, TX, 75015 USA
Notice of Process Address	CORPORATION SERVICE COMPANY 209 WEST WASHINGTON STREET CHARLESTON, WV, 25302
Principal Office Address	2727 CHEMSEARCH BLVD IRVING, TX, 75062 USA
Type	Address

Officers	
Type	Name/Address
Director	MIKE BENTON 2727 CHEMSEARCH BLVD IRVING, TX, 75062
Director	JIM BIRD 2727 CHEMSEARCH BLVD IRVING, TX, 75062
President	MICHAEL J. HOWDESHELL 2727 CHEMSEARCH BLVD IRVING, TX, 75062
Secretary	RUSSELL L. PRICE 2727 CHEMSEARCH BLVD IRVING, TX, 75062
Treasurer	IRENA M. KILDISAS 2727 CHEMSEARCH BLVD IRVING, TX, 75062
Vice-President	CHRISTOPHER T. SORTWELL 2727 CHEMSEARCH BLVD IRVING, TX, 75062
Type	Name/Address

Annual Reports	
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For more information, please contact the Secretary of State's Office at 304-558-8000.

Monday, February 12, 2024 — 8:44 AM

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- Any Words ⁽ⁱ⁾
- All Words ⁽ⁱ⁾
- Exact Phrase ⁽ⁱ⁾

e.g. 123456789, Smith Corp

"The Davey Tree Expert Company"	×
"Harmon Vegetation Management LLC"	×
"Terracare Inc."	×
"Chem Aqua Inc"	×

- Classification ∨
- Excluded Individual ∨
- Excluded Entity ∨
- Federal Organizations ∨
- Exclusion Type ∨
- Exclusion Program ∨
- Location ∨
- Dates ∨

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COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>OS/MP</u> Date: <u>2/27/24</u> Solicitation No. <u>CO# 2</u> <u>Renewal</u>	Agency: West Virginia General Services Division Procurement Officer Submitting Requisition: Cody Taylor Requisition No. CMA GSD2200000008 PF No.: 1044293
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This checklist **MUST** be completed by a state agency's designated procurement officer and submitted with the Purchase Requisition to the Purchasing Division. The purpose of the checklist is to verify that an agency procurement officer has obtained and included required documentation necessary for the Purchasing Division to process the requisition without future processing disruptions. At the agency's preference, the agency **MUST** either submit the checklist by attaching it to the requisition's Header **OR** by placing it in the requisition's Procurement Folder.

FOR ALL SOLICITATION TYPES:

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Use of correct specification template	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Use of most current terms and conditions www.state.wv.us/admin/purchase/TCP.pdf	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Maximum budgeted amount in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Suggested vendors in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Capitol Building Commission pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Financing (Governor's Office) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Fleet Management Division pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
10	Insurance requirements				
	Commercial General Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Automobile Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Workers' Compensation/Employer's Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Cyber Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Builder's Risk/Installation Floater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Office of Technology CIO pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Treasurer's Office (banking) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR CHANGE ORDERS/RENEWALS:

1	Two-party agreement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2	Standard change order language	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Office of Technology CIO approval	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	Justification for price increases/backdating/other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6	Secretary of State Verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	State debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	Federal debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*The items pre-checked are required before a Purchase Requisition may be submitted to the Purchasing Division. Failure to complete and verify this documentation may result in rejection of the requisition back to the agency. It is up to the agency procurement officer to determine if pre-approvals, insurance, or other documentation is needed for the purchase. The referenced information below may be used to make this determination.

For Purchasing Division Use Only:

I have reviewed the requisition identified above and find that it is sufficient to advertise publicly to the vendor community. My review does not preclude the possibility that the vendor community, or some other entity, will identify an area of concern; however, should such issues or concerns arise, they will be reviewed and addressed as may be appropriate.

Signature: Tura J